



**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
EMERGENCY OUTREACH BUREAU
CALWORKS MENTAL HEALTH SUPPORTIVE SERVICES**

**DMH CALWORKS BULLETIN No. 04-01
PROCEDURE CODES FOR CALWORKS SERVICES**

December 15, 2004 [Revised March 1, 2007]

TO: All DMH CalWORKs Mental Health Supportive Services Providers

FROM: Dolores Daniel, Program Head
CalWORKs Program

SUBJECT: **PROCEDURE CODES FOR CalWORKs SERVICES**

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 5. Chart of CalWORKs Procedure Codes
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1. PURPOSE

This Bulletin No. 04-01 identifies the Procedures Codes to be utilized when billing CalWORKs mental health supportive services under the Integrated System (IS).

2. BACKGROUND

Since the inception of the Los Angeles County DMH CalWORKs Mental Health Supportive Services Program in 1999, DMH directly-operated clinics and contract agencies have reported services using the CalWORKs Activity Codes on the Management Information System (MIS). On April 14, 2003, federal law required health care providers, including mental health providers, to implement the HIPAA Privacy

rules. On October 16, 2003, all health care providers were required to implement the HIPAA Transaction and Codes Sets rule or be able to demonstrate good faith efforts to that end. These rules require that providers of health care services anywhere in the USA must use nationally recognized Procedure Codes to claim services.

3. IMPLICATIONS FOR SERVICE DELIVERY

These changes are being made in conjunction with DMH's implementation of a new Management Information System known as the Integrated System (IS). The change from Activity Codes to Procedure Codes is not about a change in services provided by DMH and is not a change in reimbursement rates for those services. All services that are currently provided are found in the HIPAA compliant coding system.

4. PROCEDURE CODES

Effective immediately upon a provider's utilization of the Integrated System (IS), providers are to use the Procedure Codes on the following pages for documenting and claiming CalWORKs mental health supportive services provided to CalWORKs participants.

5. CHART OF CALWORKs PROCEDURE CODES

See the chart on the following pages for a listing of the services and procedure codes to utilize for billing CalWORKs services.

6. OTHER INFORMATION

Additional information (such as scope of practice, description of services, reporting and documentation note, etc.) is available in "A Guide to Procedure Codes for Claiming Specialty Mental Health Services" available at http://dmh.lacounty.info/hipaa/downloads/PROCEDURE_CODES_MANUAL.pdf. This Guide, prepared by DMH, lists and defines the compliant code that DMH believes reflects the services it provides throughout the system, whether by directly-operated or contacted organizational providers or individual, group, or organizational network providers.

Service	Procedure Code	
<u>ASSESSMENT</u> Psychiatric diagnostic interview.	90801	
<u>PSYCHOLOGICAL TESTING</u> (Scoring time is not reimbursable)	Face-to-face administration time by psychologist or physician	96101
	Face-to-face administration time by Technician	96102
	Administered by computer	96103
	Test interpretation and report writing	90889
<u>INDIVIDUAL PSYCHOTHERAPY (NON-FAMILY)</u>	Duration of Face-to-Face	Procedure Code
	0-19 min.	H2015
	20-44 min.	90804
	45-74 min.	90806
	75+ minutes	90808
<u>INDIVIDUAL PSYCHOTHERAPY (NON-FAMILY) WITH EVALUATION AND MANAGEMENT</u>	Duration of Face-to-Face	New Procedure Code
	0-19 min.	H2015
	20-44 min.	90811
	45-74 min.	90813
	75+ min.	90815
<u>INDIVIDUAL REHABILITATION SERVICE (NON-FAMILY)</u> Individual Rehabilitation Service.	H2015	

Service	Procedure Code
<u>INDIVIDUAL REHABILITATION SERVICE (NON-FAMILY)</u> On-going support to maintain employment.	H2025
<u>FAMILY AND GROUP SERVICES (EXCEPT MED SUPPORT GROUP)</u> Collateral (one <u>or more</u> clients represented).	90887
<u>FAMILY AND GROUP SERVICES (EXCEPT MED SUPPORT GROUP)</u> Group Psychotherapy.	90853
<u>FAMILY AND GROUP SERVICES (EXCEPT MED SUPPORT GROUP)</u> Group Rehabilitation (Family and Non-Family).	H2015
<u>MEDICATION SUPPORT</u> Individual Medication Service (Face-to-Face).	90862
<u>MEDICATION SUPPORT</u> Brief Medication Visit (Face-to-Face).	M0064
<u>MEDICATION SUPPORT</u> Comprehensive Medication Service (prescription services by phone or with a collateral)	H2010
<u>OTHER SERVICES</u> Targeted Case Management (TCM).	T1017
<u>OTHER SERVICES</u> Team Conferences/Case Consultation (Limited to 180 minutes per quarter for an individual client).	1-59 minutes = 99361
	60+ minutes = 99362
<u>OTHER SERVICES</u> No Contact – Report Writing.	90889
<u>CRISIS INTERVENTION</u>	H2011
<u>COMMUNITY OUTREACH SERVICES</u> Mental Health Promotion.	200
<u>COMMUNITY OUTREACH SERVICES</u> Community Client Services.	231